

Charles A. But  
Paralegal Specialist

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	✓		1			
2		1		1		
3		2		1		
4		①		1		
5		①		1		
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TOTAL IND.	4		4			
TOTAL DEP.		4		4		
TOTAL CLAIMS		4		4		

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